File Number: 84-5821	
For the reporting period ended December 31. 2001	



OMB APPROVAL

ımber. July 31, 2003

ed average burden

er full response. . . . 6.00 mated average burden hours per intermediate

Estimated average burden hours per minimum

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM TA-2

FORM FOR REPORTING ACTIVITIES OF TRANSFER ACENTS

	ATTENTION:	INTENTIONAL MISS CONSTITUTE FEDER See 18 U.S.C. 1001 and	RAL CRIMINA	<i>E</i> 1
	ull name of Registrant as state Oo not use Form TA-2 to change name		Mutual Sh	MAR 2 9 2002 hareholder Services, LLC
а.	During the reporting period. (Check appropriate box.)	has the Registrant engaged a s	• •	perform any of its transfer agent function
	□ ∧II	□ Some	None 29	tot utili
ħ				
ν.	If the answer to subsection company(ies) engaged:	•	he name(s) and tr	ansfer agent file number(s) of all ser
υ.		s.etc.	•	<u>-</u>
0.	company(ies) engaged:	s.etc.	•	. A. Trans. Temporal and
	company(ies) engaged:	s.etc.	•	. A. Trans. Temporal and
	company(ies) engaged:	s.etc.	•	. A. Trans. Temporal and
	company(ies) engaged:	s.etc.	•	. A. Trans. Temporal and
	Name of Transfer Agent(s):	Legy		. A. Trans. Temporal and
	Name of Transfer Agent(s). During the reporting period.	Legy		PROCESSED JUL 2 5 2002 THOMSON FINANCIAL
c.	During the reporting period. transfer agent functions? Yes If the answer to subsection (company(ies)) engaged:	has the Registrant been engag No is yes, provide the name(s) a as a service company to perfo	ed as a service com	PROCESSED JUL 2 5 2002 THOMSON FINANCIAL

3.	а.	Comptrol Federal D Board of	ler of the Currency eposit Insurance Co	deral Reserve System		y.)		
	b.					in 60 calendar days fo ng? (Check appropri		which
			amendment(s) to file amendment(s able	s)				
	c.	If the answer	to subsection (b) is a	no, provide an explai	nation:			
_								
		If	the response to a	nny of questions 4	-11 below is no	ne or zero, enter	"0."	
4.	Nu	mber of items r	eceived for transfer	during the reporting	period:		C	<u></u> _
5.	a.					n the Direct Registrat as of December 31:		<u>}</u>
	b.		-		· ·	irect purchase plan a	26 717	
	c.	Number of ind	ividual securityhold	ler DRS accounts as	of December 31:		0	<u> </u>
	d. Approximate percentage of individual securityholder accounts from subsection (a) in the following categories as of December 31:						as of	
		Corporate Equity Securities	Corporate Debt Securities	Open-End Investment Company Securities	Limited Partnership Securities	Municipal Debt Securities	Other Securities	
		0%	0%	100%	0%	. 0%	0%	

6	Number of securities	issues for which Re	ristrant acted in the t	following capacities a	is of December 31.

a. Receives items for transfer and maintains the master securityholder files:

b. Receives items for transfer but does not maintain the master securityholder files:

c. Does not receive items for transfer but maintains the master securityholder files:

Corporate Securities		Open-End Investment Company	Limited Partnership Securities	Municipal Debt Securities	Other Securities
Equity	Debt	Securities			
0	0	28	0	0	0
	-				<u> </u>
0	0	0	0	0	0
0	0	1	0	0	0

7.		Scope of certain additional types of activities performed: a. Number of issues for which dividend reinvestment plan and/or direct purchase	กโลก
		services were provided, as of December 31:	
	ь	b. Number of issues for which DRS services were provided, as of December 31:	
	С	c. Dividend disbursement and interest paying agent activities conducted during th	
		i. number of issues	
		ii. amount (in dollars)	13,468,496
8.	a.	a. Number and aggregate market value of securities aged record differences, exist December 31:	ng for more than 30 days, as of
		Prior Transfer Ag (If applicab	· · · · · · · · · · · · · · · · · · ·
		i Number of iccues	
		ii. Market value (in dollars)	
	b.	b. Number of quarterly reports regarding buy-ins filed by the Registrant with its A SEC) during the reporting period pursuant to Rule 17Ad-11(c)(2):	
	c.	c. During the reporting period, did the Registrant file all quarterly reports regardin (including the SEC) required by Rule 17Ad-11(c)(2)?	g buy-ins with its ARA
		☐ Yes ☒ No	
	d	d. If the answers to subsection (c) is no, provide an explanation for each failure to	file:
		We had no buy-ins to report.	·
9.	a.	a. During the reporting period, has the Registrant always been in compliance with as set forth in Rule 17Ad-2?	the turnaround time for routine items
	,	∑ Yes	
		If the answer to subsection (a) is no, complete subsections (i) through (ii).
		: Describe the country of the during the companion and in ordinal the Description	
		 Provide the number of months during the reporting period in which the Regi compliance with the turnaround time for routine items according to Rule 174 	
		ii. Provide the number of written notices Registrant filed during the reporting p	eriod with the
		SEC and with its ARA that reported its noncompliance with turnaround time	
		items according to Rule 17Ad-2.	
10.		Number of open-end investment company securities purchases and redemptions (tranand distribution postings, and address changes processed during the reporting period	
	a		
	_	b. Number of transactions processed on a date other than date of receipt of order (a	s ofs):

11. a. During the reporting period, provide the date of all database searches conducted for lost securityholder accounts listed on the transfer agent's master securityholder files, the number of lost securityholder accounts for which a database search has been conducted, and the number of lost securityholder accounts for which a different address has been obtained as a result of a database search:

Date of Database Search	Number of Lost Securityholder Accounts Submitted for Database Search	Number of Different Addresses Obtained from Database Search

b.	Number of lost securityholder accounts that have been remitted to states during the	
	reporting period:	_

SIGNATURE: The Registrant submitting this Form, and the person signing the Form, hereby represent that all the information contained in the Form is true, correct, and complete.

Manual signature of Official responsible for Form:	Title:
A G	President
Jugory B. Sitts	Telephone number: (440) 922-0066
Name of Official responsible for Form: (First name, Middle name, Last name)	Date signed (Month/Day/Year): 3/28/2002
Gregory Brainard Getts	

File Number	Supplement to Form TA-2
For the reporting period ended December 31,	Full Name of Registrant
	e name(s) and file number(s) of the named transfer agent(s) for which the Registrant has been to perform transfer agent functions:

Name(s):	File No. (beginning with 84- or 85-):
	(beginning with 84- or 85-):
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